## Written Testimony of Peri L. Nearon, MPA Director, Office of Nutrition & Fitness NJ Department of Health and Senior Services Before the

New Jersey Senate Health, Human Services and Senior Citizens Committee November 8, 2010

Good afternoon Chair Weinberg, Vice Chair Vitale and members of the committee. My name is Peri Nearon, and I am the Director of the Office of Nutrition & Fitness at the Department of Health and Senior Services. Thank you for the opportunity to testify on behalf of the Department. I am here today to share with you what we are doing to address the obesity epidemic at the state health department.

As you are most likely aware, obesity rates are a major public health concern both nationally and here in NJ. Nearly one quarter of NJ adults were obese in 2009, and one in ten HS students are also obese. Rates vary by race and ethnicity – rates are highest among African Americans and Hispanics. Even more troubling are the obesity rates for low income, 2 – 5 year olds. At 18.4% in 2009, NJ has the dubious distinction of having the highest rates in the nation. In terms of cost, it is estimated that we spend 2.2 billion dollars on obesity attributable health costs, and if obesity rates continue to increase at the *current* pace, not only will nearly 40% of NJ adults be obese by 2018, but NJ will spend **9.3 billion** on these same obesity-attributable costs. This is *astronomical*.

The Department's efforts date back several years. In 2003, due to the leadership of Senator Weinberg, her legislation, A-3534, called for the establishment of an obesity prevention task force to examine the issue and make recommendations for how best to address it. In 2006, they submitted a plan to the governor and legislature that included a recommendation to establish a state level office to focus on obesity in NJ.

In 2007, in a difficult fiscal environment that included a hiring freeze, the Department established the Office of Nutrition & Fitness, the only office of its kind in the nation. The office became fully operational in 2008 with funding from the Centers for Disease Control and Prevention (CDC) for the Nutrition, Physical Activity and Obesity Program (NPAO).

The NPAO is funded at 4.1 million for 5 yrs (2008 – 2013) to take the lead in coordinating obesity prevention efforts statewide. We have developed a robust statewide, public-private partnership, **ShapingNJ**, that focuses on policy and environmental change. We are looking at the *environment* to *support* healthy behavior – to make "the healthy choice the easy choice" for NJ residents. This is nothing short of a change of culture! We can no longer simply tell people to eat

better and exercise more. Rather, we have to ensure that there is access to healthy, affordable food and opportunities for physical activity.

As recently as September, our Commissioner, Dr. Alaigh visited Trinity Episcopal Cathedral in Trenton for its weekly Healthier Heart Farmer's Market which features Jersey Fresh fruits, vegetables and plants, and she accepted our first **ShapingNJ** partner agreement with a faith-based organization, a good example of a community setting where our work can have great impact. She has been a champion for this work, and as a physician, has seen firsthand the damaging results of obesity and its relationship to chronic disease.

We are also focusing on reaching those who are at highest risk for health disparities and obesity, that is our low income, minority populations, often inner city, but not always. There are some very high obesity rates in some of NJ's rural areas. If we do not focus on those at highest risk, we will not make an impact.

The CDC identified 6 target behaviors that are proven to impact obesity rates, and we used these to guide our work. The six behaviors and goals for change are: increasing breastfeeding, increasing the consumption of fruits and vegetables and increasing physical activity, and on the other end, decreasing to viewing, decreasing the consumption of sugar sweetened beverages and decreasing the consumption of energy dense foods.

The work of Year 1 was devoted to building the partnership: **ShapingNJ** is currently made up of 115 organizations throughout NJ, all of whom have signed a formal agreement, committing to working as part of the partnership. It is a diverse group, as we know that in order to have a real impact on obesity rates, we need partners from sectors *other than health*, such as transportation, parks and recreation, law and public safety and the built environment. At the state level, we count among our partners the Departments of Transportation, Education and Agriculture. Other partners include the YMCA's, American Heart, American Cancer, academic institutions, non-profits, for profits, corporations, hospitals, the League of Municipalities – too many to name. A list of partners is included in your materials.

What **ShapingNJ** offers is coordination and an infrastructure, for much of the good work that is taking place. During Year 2, the partners, selected 23 evidence-based, proven strategies across 5 settings that offer excellent opportunities to address obesity prevention: schools, community, work sites, health care and child care. A copy of the strategies is also included in your materials. We have recently begun implementation, using stimulus dollars, as well as the efforts of our partners.

Additionally, we were required to write a new State Obesity Prevention Plan, and that was submitted to the CDC on June 30<sup>th</sup> and has been accepted. The full

report, as well as a shorter public version will be available shortly on our website <a href="https://www.shapingnj.gov">www.shapingnj.gov</a>.

Finally, we are here today with some of our key partners to impress upon you the severity and pressing need for action. We ask you to recognize this for the hot button issue that it is. We didn't get to this point overnight, and there is no quick fix. This is the first generation whose life expectancy is shorter than their parents, and obesity has been recognized as a national security issue, as many of our young people are not healthy enough to meet the requirements to enlist in the armed forces. We must continue and step up our efforts in order to stem the tide of obesity and its related chronic diseases, and control the costs so clearly associated with this issue.

Thank you Senator Weinberg, Senator Vitale and other members of the committee for allowing me to speak on this important issue.